

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 03, 2007 8:00 am**  
**Secretary of State**

04-20-2007 90032 034 \*\*\*\*50.00

**DOCUMENT # L05000067373**

1. Entity Name  
**405 CHARLES, LLC**



Principal Place of Business  
**5111 RIDGEWOOD AVE., SUITE 300  
PORT ORANGE, FL 32127**

Mailing Address  
**5111 RIDGEWOOD AVE., SUITE 300  
PORT ORANGE, FL 32127**

**30006673**



**DO NOT WRITE IN THIS SPACE**

01222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**20-3684563**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**CLARK, D. ANDREW  
5111 RIDGEWOOD AVE., SUITE 300  
PORT ORANGE, FL 32127**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when releasing)

4/11/07  
DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
CLARK, D. ANDREW  
5111 RIDGEWOOD AVE., SUITE 300  
PORT ORANGE, FL 32127**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

5/1/07  
Date

Daytime Phone #